Author’s response to reviews

Title: A Rare Case of Primary Purulent Bacterial Pericarditis due to Streptococcus Intermedius in an Immunocompetent Adult: A Case Report

Authors:

Mohammad Saud Khan (mohammad.khan2@utoledo.edu)
Zubair Khan (zubair.khan@utoledo.edu)
Bhavana Siddegowda Banglore (bhavana.banglore@utoledo.edu)
Ghattas Alkhoury (ghattas.alkhoury@utoledo.edu)
Laura Murphy (laura.murphy@utoledo.edu)
Claudiu Georgescu (claudiu.georgescu@utoledo.edu)

Version: 2 Date: 09 Jan 2018

Author’s response to reviews:

Dear Editor,

I would like to thank you for reviewing the manuscript. I am thankful for the key suggestions provided by you.

I have following changes per your recommendations:

1. Divide the paper in to paragraph- I divided the paper into paragraphs

2. Explain what why the case is presented at the end of the introduction- done

3. Complete history, social and professional history, physical and neurological examination -I included social and professional history of patient and completed the examination.
4. What was the patient's dental status - Patient had normal dentition. I included it in manuscript.

5. Any risk factors for pericarditis? - no known risk factors were identified, i included relevant details in manuscript.

6. Give all pertinent laboratory, scan, EKG and echo results. - done

7. What was the results of the pericardial effusion chemistry, and cytology - included all these in manuscript.

8. Where anaerobic and fungal cultures done - yes they were done and were negative, i included in manuscript.

9. Did he have a PPD - He had TB quantiferon which was negative - included in paper.

10. What was the susceptibility of the bacteria isolated? - bacteria was susceptible to penicillins and ceftriaxone, included in manuscript.

11. How was it identified by the laboratory - it was identified by MALDI-TOF mass spectroscopy technique, included in manuscript.

12. Give followup of at least 6 months. What was the cardiac function tests after recovery - included in manuscript.

13. Start the Discussion with a summary of the case and its uniqueness - done

14. What was the potential etiology of the infection in the patient - The source of streptococcus intermedius infection was unclear and development of pericarditis was spontaneous without evidence of any other infective focus elsewhere. Streptococcus
intermedius is a part of normal microbial flora of human oral cavity. We believe that the most likely etiology of infection in our case was transient bacteremia from the mucosal breach in oral cavity with hematogenous spread and seeding of bacteria in pericardial cavity leading to purulent pericarditis. I have included this in manuscript.